

Message Text

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PAGE 01 NEW DE 07230 311810Z

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TAGS: SPOP, IN

SUBJ: DEVELOPMENTS IN INDIAN FAMILY PLANNING POLICY:

ENCOURAGING THINKING

SUMMARY: EMBASSY OFFICERS MET LAST WEEK WITH DR. S. CHANDRASEKHAR, ADDITIONAL SECRETARY, DEPARTMENT OF FAMILY PLANNING, MINISTRY HEALTH & FAMILY PLANNING, FOLLOWING HIS RETURN FROM THE ECAFE MEETING IN BANGKOK. IN A BROAD DISCUSSION COVERING CURRENT DEVELOPMENTS IN THE INDIAN FAMILY PLANNING PROGRAM, CHANDRASEKHAR NOTED THE SHIFT TOWARD AN INTEGRATION OF HEALTH AND FAMILY PLANNING SERVICES IN RURAL AREAS, EXPLAINED INDIA'S POSITION AT THE ECAFE POPULATION CONFERENCE AND EMPHASIZED THE MARGINAL IMPACT OF FOREIGN ASSISTANCE UPON POPULATION CONTROL IN INDIA. END SUMMARY.

1. CHANDRASEKHAR STATED THAT THE GOVERNMENT OF INDIA IS SHIFTING ITS FAMILY PLANNING POLICY, AWAY FROM AN ISOLATED FAMILY PLANNING PROGRAM BASED ON INDIVIDUAL INCENTIVES TO AN INTEGRATED PROGRAM FOCUSED ON THE TOTAL HEALTH NEEDS OF THE RURAL POPULATION. THE

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PAGE 02 NEW DE 07230 311810Z

NEW STRATEGY ATTEMPTS TO INTEGRATE NATIONAL PROGRAMS IN THE FIELD OF FAMILY PLANNING, HEALTH, AND NUTRITION, IN ORDER TO IMPROVE THE

OVERALL QUALITY OF LIFE IN RURAL AREAS AND REDUCE THE PRESSURES INDUCING LARGE FAMILIES.

2. THE GOI WILL PUT A LARGE EMPHASIS ON LOWERING INFANT MORTALITY BY EXTENDING MEDICAL SERVICES IN RURAL AREAS. ACCORDING TO THE DRAFT FIFTH FIVE-YEAR PLAN, 1293 PRIMARY HEALTH CENTERS ARE TO BE UPGRADED TO 30-BED RURAL HOSPITALS, PROVIDING COMPREHENSIVE HEALTH, FAMILY PLANNING, AND MEDICAL CARE, INCLUDING SIMPLE SURGERY, OBSTETRICS, GYNAECOLOGY, AND ANAESTHESIA. THE GOI WILL EMPHASIZE COMMUNITY INCENTIVES, SUCH AS PROVIDING MORE SCHOOLS, CLINICS, AND MATERNITY CENTERS TO VILLAGES WHICH HAVE DEMONSTRABLY LOWERED THEIR BIRTHRATE.

3. UNDER THE NEW STRATEGY, THE TASK OF FAMILY PLANNING MOTIVATION IN THE COUNTRYSIDE IS TO BE ENTRUSTED TO A NEW CADRE OF MULTI-PURPOSE AUXILIARY HEALTH WORKERS, WHO WILL PROVIDE ADVICE AND FACILITIES WITHIN EASY REACH IN EVEN THE MOST ISOLATED AREAS. MALARIA, SMALLPOX, AND OTHER HEALTH WORKERS WILL BE RETRAINED AND ENLISTED TO AID IN PROSLETIZING POPULATION CONTROL. MUCH GREATER EMPHASIS WILL BE GIVEN TO THE INVOLVEMENT OF COMMUNITY LEADERS SUCH AS DOCTORS, TEACHERS, AND EVEN MEMBERS OF THE VILLAGE PAHCHAYAT. THE GOI IS ALSO ATTEMPTING TO DECENTRALIZE THE PRODUCTION OF FAMILY PLANNING MOVIES AND PLAYS TO ALLOW MORE LOCAL INITIATIVE AND INVOLVEMENT. THE US AND INDIA ARE WORKING ON A JOINT PROJECT FOR SATELLITE TRANSMISSION OF FAMILY PLANNING PROGRAMS TO TV RECEIVERS IN ABOUT 3,000 VILLAGES, TO BEGIN IN 1975.

4. THE GOI PLANS TO PROVIDE VASECTOMY SERVICES AT ALL PRIMARY HEALTH CENTERS, BUT VASECTOMY ACCEPTORS WILL BE SCREENED TO ELIMINATE OLDER MEN OR THOSE WHOSE WIVES ARE NO LONGER FERTILE. THE GOI POLICY ELIMINATES THE MASS CAMPS WHICH HAVE BEEN EMPHASIZED DURING THE PAST TWO YEARS. WHILE CONDOMS WILL CONTINUE TO BE DISTRIBUTED FREE IN RURAL AREAS, THE GOVERNMENT WILL CHARGE A SMALL FEE FOR CONDOMS IN THE CITIES. THE GOI STILL HAS NO PLANS FOR EXTENSIVE USE OF BIRTH CONTROL PILLS IN THE FAMILY PLANNING PROGRAM, ALTHOUGH THE ORAL PILOT PROJECT WILL BE EXTENDED TO SELECTED ADDITIONAL URBAN CENTERS. THE GOVERNMENT WILL TRY TO DISCREETLY ADVERTISE ABORTION IN URBAN AREAS, BUT THE GOI DOES NOT CONSIDER ABORTION FEASIBLE AMONG THE RURAL POPULATION. THE LIMITED OFFICIAL USE
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PAGE 03 NEW DE 07230 311810Z

MEDICAL TERMINATION OF PREGNANCY ACT IS GENERALLY REGARDED AS A HEALTH MEASURE, RATHER THAN AS A BIRTH CONTROL TOOL. A CONCENTRATED EFFORT IS BEING MADE IN RESEARCH IN REPRODUCTIVE BIOLOGY AND PHYSIOLOGY PRIMARILY BY THE INDIAN COUNCIL OF MEDICAL RESEARCH.

5. THE INDIAN GOVERNMENT BASICALLY SEES FAMILY PLANNING AS DEPENDENT UPON THE ENTIRE PROCESS OF ECONOMIC DEVELOPMENT, WITH POVERTY AS THE CHIEF CAUSE OF HIGH POPULATION. CHANDRASEKHAR STRESSED THE IMPORTANCE OF LOWERING THE DEATH RATE, WHICH HAS NOW REACHED A PLATEAU, IF THE BIRTHRATE IS TO BE LOWERED SIGNI-

FICANTLY. HE EMPHASIZED KERALA'S SUCCESS IN FAMILY PLANNING WHICH WAS LARGELY CONNECTED WITH THE RISE IN FEMALE LITERACY. A TREND TOWARD LATER MARRIAGES AND MORE EMPLOYMENT OPPORTUNITIES FOR WOMEN WERE ALSO CONSIDERED HELPING TO DECREASE BIRTHS. CHANDRASEKHAR INDICATED THAT THE FAMILY PLANNING BUDGET FOR INDIA'S FY1974-75 (RS. 582 MILLION) WOULD BE ABOUT THE SAME AS IN 1973-74 (RS. 535 MILLION), AND TRIED TO EMPHASIZE THAT THE GOI'S COMMITMENT TO POPULATION CONTROL REMAINED AS STRONG AS EVER.

6. DISCUSSING THE MAY ECAFE MEETING, CHANDRASEKHAR STATED THAT THE UN WORLD PLAN OF ACTION FOR POPULATION CONTROL REPRESENTED A LOWEST COMMON DENOMINATOR ACCEPTABLE TO ALL NATIONS, SINCE SEVERAL LATIN AMERICAN COUNTRIES HAD PLENTY OF EMPTY SPACE AND WANTED TO INCREASE THEIR POPULATIONS. CHANDRASEKHAR EMPHASIZED THAT THE WORLD POPULATION CONFERENCE WOULD NOT INFRINGE UPON NATIONAL SOVEREIGNTY IN ANY WAY, AND FELT THAT THE US REDRAFT OF THE UN RESOLUTION WAS SIMPLISTIC SINCE IT CALLED FOR AREVIEW OF EACH COUNTRY'S POPULATION PROGRAM BY ECOSOC, WHICH WOULD BE UNACCEPTABLE. HE REMARKED THAT THE EXCESSIVE CONSUMPTION PATTERNS OF THE DEVELOPED COUNTRIES PUT MORE OF A STRAIN ON WORLD RESOURCES THAN THE SWOLLEN POPULATIONS OF THE LESS DEVELOPED COUNTRIES.

7. CHANDRASEKHAR AND OTHER INDIANS WHO DETERMINE FAMILY PLANNING POLICY ARE QUITE SURE THAT EXTERNAL AID HAS A NEGLIGIBLE EFFECT UPON FAMILY PLANNING IN INDIA. CHANDRASEKHAR SAID THAT THE UNFPA PROGRAMS HAD ONLY A MARGINAL IMPACT AND THAT BILATERAL DONOR PROGRAMS HAD CONTRIBUTED LITTLE OR NOTHING OF USE. THE GOI BELIEVES THAT THEY HAVE ACHIEVED "SELF-SUFFICIENCY" IN FAMILY PLANNING, AND THAT EXTERNAL ADVICE IN THIS IS NO LONGER NECESSARY. (NOTE: HOWEVER, THE FIFT FIVE-YEAR PLAN CONTEMPLATES IMPORT OF SUBSTANTIAL QUANTITIES OF CONDOMS TO COVER SHORTFALL IN INDILIMITED OFFICIAL USE
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PAGE 04 NEW DE 07230 311810Z

GENOUS PRODUCTION). AN EXCEPTION IS THE FIELD OF RESEARCH IN REPRODUCTIVE BIOLOGY AND PHYSIOLOGY WHERE THE INDIANS HAVE INVITED US SCIENTIFIC COOPERATION. DURING THE RECENT VISIT OF THE US SURGEON GENERAL TO INDIA, ONE OF THE MAJOR AREA OF RESEARCH COOPERATION DISCUSSED WAS FERTILITY CONTROL.

8. COMMENT: CHANDRASEKHAR IS THE KEY OFFICIAL IN THE GOI ON FAMILY PLANNING AND HIS VIEWS BEAR CAREFUL CONSIDERATION BY ALL USG OFFICIALS CONCERNED WITH THE ISSUE. WE WILL SUBMIT OUR OWN VIEWS ON THIS SUBJECT IN RESPONSE TO STATE'S 112325. SCHNEIDER

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